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NEWS RELEASE

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Oregon House Passes Reproductive Health and Access to Care (RHAC) Bill to Protect Oregon Patients and Providers

Currently, 78 percent of Oregon counties do not have an abortion provider. RHAC addresses these barriers and increases access to reproductive and gender-affirming care.

SALEM, Ore. – Today, Oregon House Democrats passed [House Bill 2002](#), the Reproductive Health & Access to Care (RHAC) Bill. This legislation responds to the reality that, even in Oregon—[named most protective state in the nation](#) for abortion rights—the changing legal landscape after *Roe v. Wade* was overturned has caused **fear and uncertainty among medical providers and patients and has further threatened access to reproductive health and gender-affirming care.**

House Bill 2002 restores the rights Oregonians had under *Roe*, while also expanding access to care. Currently, according to the Oregon Health Authority, 78 percent of Oregon counties do not have an abortion provider; and because neighboring states like Idaho have banned services, Eastern Oregonians are experiencing a [35 percent](#) decrease in access to sexual and reproductive health care.

“The right to have an abortion does not mean that abortion is accessible,” said House Speaker Dan Rayfield (D-Corvallis). “This bill is the result of a year-long collaboration between dozens of legislators and stakeholders including patients, providers, advocates, community groups, and

legal experts. It protects, strengthens, and expands safe, equitable access to reproductive and gender-affirming care—no matter who you are, where you live, or how much money you make.”

Speaker Rayfield [convened](#) the Reproductive Health and Access to Care work group that established the priorities RHAC is built on in May of last year.

“Time and again, Oregonians have affirmed their support for making abortion safe and accessible to all. Today, House Democrats showed that they’re listening,” said Representative Andrea Valderrama (D-Outer East Portland), chief sponsor of RHAC and co-lead of the RHAC work group. “This legislation builds on our efforts to remove barriers that keep people from getting the essential health care they need, including Black, Latino and Indigenous people, immigrants, people living with low incomes, trans and non-binary people, and people in rural areas.”

The Reproductive Health & Access to Care Act moves Oregon forward in the state’s work to ensure a more just and equitable health care system by:

- Keeping the government out of medical decisions between providers and patients.
- Clarifying Oregonians’ right to abortion and gender affirming care if they need it.
- Making care more affordable and accessible by expanding insurance coverage and increasing points of access to care through new and existing health centers in medically underserved areas of our state.

Read more about RHAC [here](#).

“Lived experiences are not up for debate,” said Representative Travis Nelson (D-N & NE Portland), a registered nurse and Chief Sponsor of the bill. “As a member of the LGBTQ+ community, I want to stress that access to gender-affirming care – care that aligns a person’s body with their gender identity – is access to life-saving care.” Rep. Nelson serves as Vice Chair of the Behavioral Health and Healthcare Committee and co-led the RHAC work group.

“The reality is, RHAC reflects Oregon values. Oregonians believe there should be a right to abortion, and that healthcare should be accessible,” said Representative Rob Nosse (D- Inner SE & Inner NE Portland), Chair of the Behavioral Health and Healthcare Committee and a Sponsor of the bill. “This bill is about giving providers certainty so they can focus on their expertise as medical professionals: helping patients.”

RHAC received over five hours of testimony during a public hearing in the House Behavioral Health and Healthcare Committee, a work session, a Joint Ways and Means Committee work session, and a nearly ten-hour floor process including a robust debate and vote on the House floor.

The bill passed 36-23 and now heads to the Senate for consideration.

Background:

Speaker Rayfield [formed](#) the RHAC work group following the leaked *Dobbs* decision in May of last year. The group was co-led by Senator Lieber, Senator Steiner, Representative Nelson, and

Representative Valderrama. Under their leadership, 80+ stakeholders worked through an extensive research process and a series of discussions over many months to identify barriers for patients seeking care, the challenges healthcare providers and facilities face in delivering care, and the potential legal issues patients and providers may face. The work group compiled and [released](#) a [report](#) in December 2022 on the gaps that still exist for access to abortion and gender affirming care. House Bill 2002 is based on the findings in that report.

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